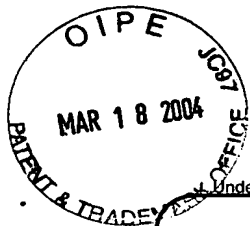


**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN  
APPLICATION DATA SHEET (37 CFR 1.76)**

|   |                       |
|---|-----------------------|
| <b>Title of Invention</b>   | FLUOROPOLYMER SEALANT |
| As the below named inventor(s), I/we declare that:  |                       |
| This declaration is directed to:  |                       |
| <input type="checkbox"/> The attached application, or   |                       |
| <input checked="" type="checkbox"/> Application No. <u>10/728565</u> , filed on <u>December 05, 2003</u> ,  |                       |
| <input type="checkbox"/> as amended on _____ (if applicable);   |                       |
| I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;   |                       |
| I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;  |                       |
| I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application. |                       |
| All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.                 |                       |

|                                 |  |
|---------------------------------|--|
| <b>FULL NAME OF INVENTOR(S)</b> |  |
| Inventor one:                   | RONALD EARL USCHOLD                              |
| Signature:                      | <u>Ronald Earl Uschold</u> Citizen of: <u>US</u> |
| Inventor two:                   | SINA EBNESAJJAD                                  |
| Signature:                      | <u>Sina Ebnesajjad</u> Citizen of: <u>US</u>     |
| Inventor three:                 |  |
| Signature:                      | _____ Citizen of: _____                          |
| Inventor four:                  |  |
| Signature:                      | _____ Citizen of: _____                          |

|  |
|--|
| <input type="checkbox"/> Additional inventors are being named on _____ additional form(s) attached hereto.   |
| <small>Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.</small> |



PTO/SB/81 (09-03)

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

|                               |                             |                      |         |
|-------------------------------|-----------------------------|----------------------|---------|
| <b>Application Number</b>     | 10/728565                   |                      |         |
| <b>Filing Date</b>            | December 05, 2003           |                      |         |
| <b>First Named Inventor</b>   | Ronald Earl Uschold Et. Al. |                      |         |
| <b>Title</b>                  | FLUOROPOLYMER SEALANT       |                      |         |
| <b>Art Unit</b>               | Unknown                     | <b>Examiner Name</b> | Unknown |
| <b>Attorney Docket Number</b> | FL0224USNA                  |                      |         |

I hereby appoint:



Practitioners at Customer Number:

23906

OR



Practitioner(s) named below:

| Name | Registration Number |
|------|---------------------|
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The above-mentioned Customer Number:

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| <input type="checkbox"/> Firm or Individual Name |  |       |  |     |  |
| Address  |  |       |  |     |  |
| Address  |  |       |  |     |  |
| City   |  | State |  | Zip |  |
| Country  |  |       |  |     |  |
| Telephone  |  | Fax   |  |     |  |

I am the:



Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

|                  |                     |                  |              |
|------------------|---------------------|------------------|--------------|
| <b>Name</b>      | Ronald Earl Uschold |                  |              |
| <b>Signature</b> |                     |                  |              |
| <b>Date</b>      | 1/14/04             | <b>Telephone</b> | 610-793-1805 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

|   |
|---|
| <input type="checkbox"/> *Total of _____ forms are submitted. |
|---|

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM****Application Number** 10/728565**Filing Date** December 05, 2003**First Named Inventor** Ronald Earl Uschold Et. Al.**Title** FLUOROPOLYMER SEALANT**Art Unit** Unknown**Examiner Name** Unknown**Attorney Docket Number** FL0224USNA

I hereby appoint:



Practitioners at Customer Number:

23906

OR



Practitioner(s) named below:

| Name | Registration Number |
|------|---------------------|
|      |                     |
|      |                     |
|      |                     |
|      |                     |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

Firm or  
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:



Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record****Name**

Sina Ebnesajjad

**Signature****Date**

1/23/04

**Telephone**

(610) 388-1368

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.



\*Total of \_\_\_\_\_ forms are submitted.

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